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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Haapalahti et al.

Serial No.: 10/600,151

Filed: June 19, 2003

Cust. No.: 33123

For: **FLANGED INNER CONDUCTOR
COAXIAL RESONATORS**

Art Unit: 2729

Examiner: Kim, Paul D.

CERTIFICATE OF MAILING PURSUANT TO
37 CFR 1.8

I hereby certify that this correspondence and the attached papers are being deposited with the United States Postal Service with sufficient postage as first class mail on the date indicated below in an envelope addressed to:

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

2/1/06
Date

Michelle Malachuk
Signature

TRANSMITTAL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

1. Transmitted herewith for filing in the above-identified patent application is a Response to Office Action and Request for Reconsideration. Also enclosed are:

☒ Return Postcard
☐ Item a
☐ Item b

2. Fee Calculation

☐ No additional claim fee is required.
☒ Amendment increases number of claims

ADDITIONAL CLAIM FEE CALCULATION

	Claims After Amendment Less Number Previously Paid For =	Number Extra*	Rate =	Fee
Total Claims	12 - 51 =	0	x \$ 50/25 =	\$0.00
Independent Claims	2 - 8 =	0	x \$200/100 =	\$0.00

* If less than zero, enter "0".

Additional Claim Fee..... \$0.00

3. ☐ Applicant is a small entity.

4. ☐ Applicant hereby petitions for an Extension of Time of ____ month, pursuant to Rule 1.136(a). Fee required \$..... \$0.00

5. ☐ Other fees due: Specify: \$0.00
Total Fees Due \$0.00

6. Payment of Fees

☐ A check in the amount of \$0.00 is enclosed.
☐ Charge Deposit Account No. 50-1213 in the amount of \$. A duplicate of this sheet is attached.

7. ☒ The Commissioner is hereby authorized to charge any additional fees (or credit any overpayment) associated with this communication and which may be required under 37 CFR § 1.16 or § 1.17 to Account No. 50-1213, referencing Docket No. 42792-6196. A duplicate of this sheet is attached.

By: Alan C. Gordon
Alan C. Gordon
Reg. No. 51,220



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Signature

RESPONSE TO OFFICE ACTION AND REQUEST FOR RECONSIDERATION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed November 3, 2005 in connection with the above-identified application, Applicant requests entry of this response and reconsideration of the application.

Amendments to the claims are reflected in the listing of claims, which begins on Page 2 of this document.

Remarks begin on Page 11 of this document